PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10789232

l	•	CLAIMS A	SMALL E	NTITY		OTHER TUAL							
			(Column 1)		(Column 2)			TYPE		OR		HER THAN	
TOTAL CLAIMS			38			•		RATE	FEE	٦	RATE	FEE	
FOR			NUMBER FILED		NUM	BER EXTRA	·	BASIC FEI	385.00	OR	BASIC FEE	 	
TOTAL CHARGEABLE CLAIMS			38 mi	nus 20=	- 18			XS 9=	162	OR			
INDEPENDENT CLAIMS			7 m	inus 3 =	. 5			X43=	172	1	X86=		
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT						11/6	OR	· · ·	-	
* 1	f the difference	e in column 1 is	less than z	ess than zero, enter "0" in column			'	+145=	- 6	OR	+290=		
	,	CI AINIC AC /	MENDE	MENDED - PART II				TOTAL	719	OR	TOTAL		
_		(Column 1)	AMENDEL	(Column 2) (Column 3)				SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	İ	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	CL AUA	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
0 (4) (29 (5) (5)							L	TOTAL			TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE		OR ,	ADDIT. FEE		
		CLAIMS		HIGHE		(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**				X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		= .	T	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							T	+145=		OR	+290=		
	. (2)							TOTAL	·		TOTAL		
(Column 1) (Column 2)						(Oal as 6)	ΑI	ODIT. FEE L	**	Δ'' Δ	DDIT. FEEL		
	`	CLAIMS		HIGHES		(Column 3)		•	•				
MEN	•	REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	ISLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,	
	Independent	*	Minus	***		=	\vdash	X43=			You		
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	A43=		OR	X86=		
* If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR L	+290=		
11	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT, FEE		
T	he "Highest Num	ber Previously Paid	For" (Total or i	SPACE IS IN	ess than) is the i	o, enter "3." nighest number		DIT. FEE L	opriate box				